

CLAIMS ONLY						Application Number		Filing Date		
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend				
1	1					51				
2		1				52				
3		1				53				
4		1				54				
5		1				55				
6		1				56				
7		1				57				
8		1				58				
9		1				59				
10		1				60				
11		1				61				
12		1				62				
13		1				63				
14		1				64				
15		1				65				
16		1				66				
17	1					67				
18		1				68				
19		1				69				
20		1				70				
21	1					71				
22		1				72				
23		1				73				
24		1				74				
25		1				75				
26		1				76				
27	1					77				
28		1				78				
29		1				79				
30		1				80				
31						81				
32						82				
33						83				
34						84				
35						85				
36						86				
37						87				
38						88				
39						89				
40						90				
41						91				
42						92				
43						93				
44						94				
45						95				
46						96				
47						97				
48						98				
49						99				
50						100				
Total Indep	14					Total Indep				
Total Depend	26					Total Depend				
Total Claims	30					Total Claims				